

**Pupil Personnel Services Credential**  
**FINAL FIELD EVALUATION**

**GENERAL INSTRUCTIONS:**

This evaluation is required as a supplement to the student's Final Field Evaluation for all MSW students who wish to obtain a PPSC.

This form is designed to be completed as a fillable PDF document, and it is fully functional in the free Acrobat Reader (<http://www.adobe.com/products/reader.html>). Please avoid using in-browser viewers such as Preview (Mac) or File Viewer (Windows). If you need technical assistance with this form, please call 510-664-5295.

\_\_\_\_\_  
**Today's Date**

\_\_\_\_\_  
**Student Last Name**

\_\_\_\_\_  
**Student First Name**

\_\_\_\_\_  
**SID#**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Contact Phone Number**

**Concentration Area:**

- Strengthening Children, Youth & Families
- Advancing Health & Wellness Across the Adult Lifespan
- Strengthening Organizations & Communities
- Post-MSW PPSC Program

**Applicable Specialty Areas:**

- IV-E Child Welfare
- MSW-MPH Joint Degree Program
- MSW-MPP Joint Degree Program
- MSW-PHD Combined Program

**FIELD PLACEMENT HOURS VERIFICATION:**

School Site/Placement Setting	Grade Level	Placement Dates	Hours in School-based Placement		
			Total Hours	<i>with at least 2 different age group settings</i>	<i>CWA additional hours</i>

**Field Instructor/PPSC Supervisor**

Please indicate below the Field Instructor/PPSC Supervisor who is verifying your field experience by completing this evaluation form:

\_\_\_\_\_  
**Field Instructor/PPSC Supervisor Name**

\_\_\_\_\_  
**Primary Employment Site**

\_\_\_\_\_  
**Supervisor's Email Address**

\_\_\_\_\_  
**Supervisor's Primary Contact Phone #**

\_\_\_\_\_  
**Secondary Field Instructor Name**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Phone #**

\_\_\_\_\_  
**Berkeley Social Welfare Field Consultant Name**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Phone #**

## **How to Complete This Evaluation:**

Assign a rating from 0 to 10 for EACH of the social work competencies listed below, and enter the number for your rating in the box provided for each competency. Ratings should be based on your and others' observations of the student's performance. Please provide comments for each section in the space provided.

Rating guidance is provided for each competency on the following scale points:

**0=Not competent; 5=Beginning MSW Level; 10 =Advanced/High Skill Level**

Generally we would like students to achieve an average "5" rating midway through their second year field placement and then somewhat higher than that by completion of their internship. Since a rating of "10" would indicate a skill level commensurate with a seasoned school social worker, we do not expect any of our students to achieve that rating. So, please only assign that rating sparingly and with substantial justification.

Conversely, if any competency is rated as "0" please provide in the "Observed behaviors and Comments" box a separate detailed description of the area(s) needing improvement. A "0" rating in any section may indicate that the student has not demonstrated sufficient competence required for the credential. Since these competencies are reflective of the CTC's requirements for the PPSC there should be NO "Not Applicable" ratings.

If there are areas of the student's performance that are not reflected in the listed competencies or if you need more room to write in any section please provide that information in the "Additional Comments" section. Additional pages may be attached.

### **1) Engagement with Clients**

CTC Standards Addressed: 20-Direct Learning Support

<b>0</b>		<b>5</b>	<b>10</b>
Is afraid of and/or avoids clients. Has poor ability to build rapport. Escalates clients in crisis.		Can get most clients to come in and engage in counseling. Establishes warm, empathic working relations. Can cope with crises calmly and confidently.	Uses a variety of creative techniques to successfully engage even the most hostile and resistant clients. Develops very good therapeutic rapport with clients. Can diffuse and calm crisis situations in a therapeutic manner.
<b>Rating:</b>  _____	<b>Observed Behavior and Comments:</b>		

### **2) Consultation with Teachers/Staff, Parents, or Other Collaterals**

CTC Standards Addressed: 7-Family-School Collaboration; 10-Consultation

<b>0</b>		<b>5</b>	<b>10</b>
Does not ever consult with teachers, parents/caregivers , and/or other community providers regarding students' needs. Develops conflictual relationships with consultees and/or displays excessive anxiety in those relationships.		Recognizes need for consultation and consults with teachers, parents/caregivers , and/or other community providers most times when it is appropriate or necessary. Is comfortable, confident, and professional in consultee relations.	Consults with teachers, other school staff, parents/caregivers, and/or other community providers on a regular basis and develops a collaborative relationship with them to address students' needs, appropriate to the developmental level and needs of the students. Demonstrates professional self-assurance and is sought out by others for help and support.
<b>Rating:</b>  _____	<b>Observed Behavior and Comments:</b>		

### 3) Assessment of Clients

CTC Standards Addressed: 2-Growth and Development; 3-Social-Cultural Competence; 19-Wellness and Resiliency Promotion

0		5	10
Does not use any sources of information about development or cultural history. Fails to consider culturally and developmentally appropriate assessment tools. Ignores significant risk factors and protective factors.		Has some knowledge of culturally and developmentally appropriate assessment tools and integrates them in most of the time, but may have difficulty implementing them. Considers protective factors. Assesses risk of harm to self or others accurately in most appropriate situations.	Uses a wide range of information sources and culturally and developmentally appropriate assessment tools. Actively reflects on cultural and developmental considerations and integrates them into practice. Integrates protective factors into a comprehensive assessment. Accurately assesses risk of harm to self or others in all appropriate situations.
Rating:  _____	Observed Behavior and Comments:		

### 4) Treatment Planning with Clients

CTC Standards Addressed: 5-Comprehensive Prevention and Early Intervention for Achievement; 12-Professional Leadership Development

0		5	10
Has no understanding of how to establish goals and match interventions accordingly. Has no understanding of how to utilize evidence informed approaches.		Establishes measurable goals and objectives for clients and other customers and can identify effective interventions to achieve them. Can identify evidence informed approaches that could be used to address goals and objectives.	Can establish measurable and achievable, solution focused goals and either: a) prioritize them for implementation in a school setting; b) demonstrate the ability to implement meaningful interventions linked to them; or c) coordinate/case-manage other interventions as needed. Can identify and employ evidence informed interventions related to goals and objectives
Rating:  _____	Observed Behavior and Comments:		

### 5) Intervention Implementation and Evaluation of Services Provided to Clients

CTC Standard Addressed: 4-Assessment

0		5	10
Unable to implement interventions or does so in a very rigid manner. Does not gather any data or feedback from anyone on the effectiveness of interventions for pupils/clients. Fails to modify approach when interventions are ineffective.		Selects intervention methods that fit the person, situation and/or context and balances structure with flexibility. Gathers data and/or feedback from pupils/clients or customers (teachers) on most occasions. Modifies approach with feedback.	Selects the best available and most relevant activities and/or intervention methods; sequences and guides the process in a patient, flexible and structured manner. Regularly utilizes pupil/client and/or customer (teachers, caregivers, or other providers) feedback to evaluate outcomes and modifies approach accordingly.
Rating:  _____	Observed Behavior and Comments:		

**6) School-wide and/or Systemic Intervention Planning**

CTC Standards Addressed: 9-School Safety and Violence Prevention; 13-Collaboration and Coordination of Pupil Support Systems; CWA 5-School Culture and Related Systems

0		5	10
Lack of participation/interest in school-wide events to improve school climate. Unable to recognize the need for school wide interventions or school climate issues. Unaware of how and when to utilize pupil support systems (referral processes, SST's, IEP's, etc.)		Attends school-wide events and plays a visible role in school climate issues. Understand when and how to utilize pupil support systems and make appropriate referrals.	Utilizes existing assessments of school-wide needs and plans interventions to fill gaps where identified. Collaborates with partners to effectively implement school wide prevention and intervention programs Skillfully employs pupil support systems in all appropriate circumstances.
<b>Rating:</b>  _____	<b>Observed Behavior and Comments:</b>		

**7) Evaluation of Mezzo and/or School-wide Intervention Efforts**

CTC Standards Addressed: 5-Comprehensive Prevention and Early Intervention for Achievement; 23-Research

0		5	10
Does not gather any data or feedback on the effectiveness of mezzo and/or school-wide interventions.		Sometimes gathers client and/or school staff feedback and/or objective data to evaluate the outcomes of mezzo and school-wide prevention and intervention efforts. Is able to and sometimes modifies approaches as a result of feedback.	Regularly uses client and/or school staff feedback and/or objective data to evaluate mezzo and school-wide outcomes of mezzo and school-wide prevention and intervention efforts. Modifies approaches as appropriate in response to feedback and data.
<b>Rating:</b>  _____	<b>Observed Behavior and Comments:</b>		

**8) Collaboration and Coordination Skills**

CTC Standards Addressed: 13-Collaboration and Coordination of Pupil Support Systems; CWA 4-Collaboration and Partnerships

0		5	10
Does not participate in any coordinated service team (CST, SST, IEP, etc.) meetings and/or does not know how to utilize school or agency resources on behalf of clients.		Occasionally attends coordinated service team meetings and can contribute information on how to utilize resources for services.	Is an active participant in coordinating service team meetings and routinely reaches out to appropriate staff members and community resources to access services for clients.
<b>Rating:</b>  _____	<b>Observed Behavior and Comments:</b>		

### 9) Professional Ethics

CTC Standards Addressed: 6-Professional Ethics and Legal Mandates; 18:-Professional Ethics

0		5	10
Has acted in unethical ways on more than on occasion. Does not understand confidentiality and mandated reporting requirements.		Is aware of ethical issues and utilizes supervision and/or consultation to resolve them as appropriate. Understands confidentiality and utilizes good judgment in making mandated reports.	Clearly demonstrates understanding of confidentiality , and mandated reporting procedures. Is aware of ethical issues and utilizes supervision and/or consultation to resolve them as appropriate. Can advise other school staff in need of consultation on ethical issues.
Rating:  _____	Observed Behavior and Comments:		

### 10) Professional Conduct

No associated CTC Standards

0		5	10
Demonstrates inappropriate personal boundaries. Has excessive conflicts with co-workers. Frequent unexplained absences or lateness.		Understands the need for professional boundaries and can negotiate them most of the time. Enjoys good working relations with co-workers. Is consistently on time and responsible with schedule.	Clearly demonstrates understanding of personal boundaries and handles conflict in a comfortable and mature manner. Is seen as a leader among co-workers. Manages work time well without excessive overtime.
Rating:  _____	Observed Behavior and Comments:		

### 11) Self-Reflective Practice

CTC Standards Addressed: 14-Human Relations; 8-Self Esteem and Personal and Social Responsibility

0		5	10
Avoids Field Instructor and/or is routinely late and/or unprepared for field instruction. Lacks ability for self-reflection and/or receive constructive feedback. Frequently complains of feeling stressed and/or being overwhelmed but identifies no methods to cope more effectively.		Attends Field Instruction hours regularly and prepared most of the time. Can utilize self-reflection and constructive feedback to improve skills. Recognizes feeling stressed and has some methods to cope with it.	Attends all Field instruction meetings regularly, is well prepared with agenda, responds well to constructive feedback, and actively utilizes self-reflection to improve skills. Seeks out additional opportunities for professional and/or personal growth and development. Is proactive in employing methods of reducing stress through self-care and can set boundaries and priorities to avoid burnout.
Rating:  _____	Observed Behavior and Comments:		

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**Additional Comments:**

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**STUDENT COMMENTS**

Please record any summary comments or concerns here:

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**FIELD INSTRUCTOR’S GRADE RECOMMENDATION**

Please check the appropriate box below:

- SATISFACTORY:**  
Student’s overall learning and performance is of passing quality and proceeded at an appropriate rate without apparent problems
- UNSATISFACTORY:**  
Student’s overall learning and performance is not acceptable or of passing quality

**ADDITIONAL CONCERNS – please mark a box below as appropriate:**

- I have additional concerns about this student’s overall learning and performance in one or more competency areas, and I have included these concerns in comments on this evaluation form.
  - I have additional concerns about this student’s overall learning and performance that I would like to discuss further with the assigned Field Consultant.
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**SIGNATURES**

By signing or affixing your electronic signature you are indicating that you understand this document and its contents are confidential and protected under the Family Educational Right to Privacy Act (FERPA); and that you have read this document and have not altered any sections authored by another party.

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**Field Instructor Signature**

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**Date**

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**Student Signature**

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**Date**

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**PPSC Coordinator Signature**

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**Date**

**\*SECTION BELOW PERTAINS ONLY TO THOSE SEEKING THE CWA WHOSE FI DOES NOT HAVE THE CWA**

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**CWA Name (if other than the Field Instructor)**

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**CWA Email address**

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**CWA Supervisor Signature**

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**Date**